PTO/SB/17 (07-06)

Under the Panagork F	Reduction Act of	no person are required to		ent and Trade	roved for use through emark Office; U.S. DE ation unless it display:	PARTMENT OF	F COMMERCE		
Olider the Lepidopa	HADDAN 2004.	no porson are required in	I		mplete if Know				
Fees pursuant to the Cons		ns Act, 2005 (H.R. 4818).	Application Nu	umber	10/694,884-Cd	onf. #00411	1		
FFF TF	RANSM	ΤΤΔΙ	Filing Date		October 29, 20	003			
FEE TRANSMITTAL			First Named Inventor Koji KANDA						
For FY 2005			Examiner Name R. D. McCloud			1			
Applicant claims	Art Unit 2837			- "					
TOTAL AMOUNT OF PAYMENT (\$) 620.00			Attorney Docke	Attorney Docket No. 1560-0401P					
METHOD OF PAYN	IENT (check all the	nat apply)							
	LJ	foney Order No		r (please ide Birch, S	ntify):tewart, Kolasch	& Birch, LI			
					eck all that apply)				
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayment of X Credit any overpayments									
fee(s) un	der 37 CFR 1.16 a	and 1.17							
1. BASIC FILING, SEA		INATION FEES					*****		
·	FILING	G FEES SE Small Entity	ARCH FEES Small Entity	Υ	INATION FEES Small Entity		-1al (#\		
Application Type	Fee (\$)	Fee (\$) Fee (Fee (\$		Fees P	aid (\$)		
Utility	300	150 500		200	100				
Design	200	100 100	_	130	65				
Plant	200	100 300		160	80				
Reissue	300	150 500		600	300				
Provisional	200	100	0	0	0				
2. EXCESS CLAIM FEI	ES					Fee (\$)	Small Entity Fee (\$)		
Fee Description	aludina Daisausa)						25		
Each claim over 20 (inc	,					50 200	100		
Each independent clain Multiple dependent cla		g Keissues)				360	180		
		(¢) = ===	Daid (\$)		Multiple Depende		100		
Total Claims Ex		ee (\$) Fee	Paid (\$)	-		Fee Paid (\$)			
HP = highest number of tob	al claims paid for, if gr				<u>.cc (4)</u>	, cc i ala (¢)			
Indep. Claims Ex	xtra Claims F	ee (\$) Fee	Paid (\$)						
HP = highest number of ind	lependent claims paid	for, if greater than 3.							
3. APPLICATION SIZE	FEE						_		
If the specification and listings under 37 C	FR 1.52(e)), the a	d 100 sheets of pape application size fee d.S.C. 41(a)(1)(G) and	ue is \$250 (\$125	for small	filed sequence or entity) for each a	computer dditional 50			
Total Sheets	Extra Sheets		additional 50 or fr		eof Fee (\$)	Fee P	aid (\$)		
			(round up to a w			=			
4. OTHER FEE(S)			_ , -			Fees F	Paid (\$)		
Non English Specif	ication, \$130 fee	(no small entity dis	count)						
Other (e.g., late filing surcharce). Little a brief in support of an appeal Extension for response within first month						500.00 120.00			
		EXICISIONIOFIC	sponse within	mot mont	<u> </u>	120	7.00		

SUBMITTED BY				
Signature	Registration No. (Attorney/Agent)	29,680	Telephone	(703) 205-8000
Name (Print/Type) Michael K Mutter			Date	September 11, 2006